

Forest Practices Application/Notification Office Checklist Page 1 Northwest Region

EARR Tax Credit [] Yes No ADDITIONAL COMMENTS:

FPA/N#:	2815986
Received Date:	8-10-17

WDFW Concurrence Due Date:

WDFW Concurrence Review

Completed:

Comments Due Date:

Decision Due Date:

9-9-17

FP Forester:

SK430

Shutdown Zone:

RMAP #:

Form completed by

EDARIOLASSIFICATION, CARA GREEN AND CARGO								
FPA/N CLASSIFICATION: []II IVG []IVS	Biomass [] FFFPP [] 20-acre exempt []							
Landowner Name: SP/	Project Substitute Spray							
WRIA: Suchomush	WAU: Olney Creek							
WRIA:	WAU: Sufton Rever							
WRIA:	WAU:							
Legal Description: 23, 27-28-9E	County: Grobonish							
Activity Type: Harvestac Spray_	65 Stream ac Crossing(s)							
Road Road	Rock Pita							
Constructionft Aband	onmentft Spoilsc							
] Landowner Option Plan for Northern Spotted Owl] Cooperative Habitat Enhancement Agreement							
] Unstable Slopes (Risk: Highway, Water;) [[] Soils Map (Highly Erodible & Very Unstable) [[] SLPSTAB [[] Landslide Hazard Zonation [[] Landslide Inventory Polygon [] Rain-on-Snow and Outside Approved WA [] Hydric Soils [[] Wetland [] Forested, [] A, [] B [] In WMZ of [] A, or [] B Wetland [] In RMZ/ELZ of Type [] S, [] F, [] N water [] Water Verification []	Bull Trout Overlay HCP Bull Trout Population Bald Eagle nest or roost within 660 feet Group A or B Water Supply Hatchery (Name:) Even-Aged Harvest greater than 120 Acres Ground-based Equipment on Slopes greater than 40% Road Construction on Slopes greater than 65% Saltwater Islands (Name:) In or Over Typed Water Volume greater than 5 mbf per acre							
ı ASSOCIATED NON-SCANNED DOCUMENTS – On file with th								
] Large Landowner Road Maintenance and Abandonment Pla							
ASSOCIATED SCANNED DOCUMENTS								
Conversion Option Harvest Plan FPHP Plans & Specifications Qualified Expert Report; Type: Natural Regeneration Plan Shoreline Permit Marbled Murrelet Form FPBM Appendix(s) [] Hardwood Conversion Form] Wetland Mitigation Plan] Water Protocol Surveys] Modification Form#] Water Classification Worksheet] Shade Documentation (Stream Shade Assessment Worksheet)] Watershed Analysis Worksheet							

KEY FOR EVALUATION OF SITE SPECIFIC USE OF AERIALLY APPLIED PESTICIDES

Question	Question	Resp	Action
1 (a)	Is the pesticide on the pesticide list (WAC 222-16-070(1))?	Yes	go to 2
		No	go to I(b)
1 (b)	Is the pesticide being used under a Dept of Agriculture Experimental Use	Yes	Class III
	Permit (WAC 16-228-1460)?	No	Class IV Sp
2	Is the toxicity rating for the pesticide to be used "Danger - Poison" as	Yes	Class IV Sp
	designated in the pesticide list (WAC 222-16-070(1)(b))?	(No)	go to 3(a)
3 (a)	Is Bacillus thuringiensis (BT) the only pesticide being used on this application?	Yes	go to 3(b)
		100	go to 4(a)
3 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or	Yes	Class IV Sp
	critical habitat (State) of a species within the application area that is susceptible to the BT strain being used?	No	Class III
4 (a)	Is this operation occurring over ground water with a high susceptibility to	Yes	go to 4(b)
· (m)	contamination as specified in EPA 910/9-87-169 or in documentation provided	No	go to 5(a)
	by the department of ecology?		1
4 (b)	Is this pesticide a state restricted use pesticide for the protection of ground	Yes	Class IV Sp
. (0)	water under WAC 16-228-1231?	No	go to 5(a)
5 (a)	Is the operation adjacent (within 100 ft.) of surface water?	Yes	go to 5(b)
- (-)		No	go to 5(e)
5 (b)	Determine the toxicity rating from the pesticide list:		
, ,	*Is the toxicity rating "Caution" or "Warning"?	Yes	go to 5(c)
	*Is the toxicity rating "Danger"?	Yes	go to 5(d)
5 (c)	Is there a Group A or B water surface water system (WAC 246-290-020) intake	Yes	Class IV Sp
	OR a fish hatchery intake within one half mile downstream of the operation?	₹600	go to 5(e)
5 (d)	Is there a Group A or B water surface system intake OR a fish hatchery intake	Yes	Class IV Sp
	within 1 mile downstream of the operation?	No	go to 5(e)
5 (c)	Is the operation within 200 feet of the intake of a Group A or B spring water	Yes	Class IV Sp
	system?	No	go to 5(f)
5 (f)	Is the operation applying a pesticide in a Type A or B wetland?	Yes	Class IV Sp
		No	go to 6(a)
6 (a)	Does any portion of the planned operation cover 240 or more contiguous acres?	Yes	Class IV Sp
	Pesticide treatment units will be considered contiguous if they are separated by	16	go to 6(b)
	less than 300 feet or treatment dates of adjacent units are less than 90 days		
	apart.		
6 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or	Yes	Class IV Sp
	critical habitat (State) of a species within the application area?	(No)	go to 6(c)
6 (c)	If there is a special concern identified for this pesticide in the Board manual,	Yes	Class IV Sp
	does it apply to this application?	150	Class III

(1) Special concerns (see WAC 222-16-070 (2)6(c)) shall be evaluated by the department of agriculture. Information regarding special concerns shall be presented to the board for review. Approved special concerns shall be included in the board manual. Special concerns shall include situations where use of pesticides has the potential for a substantial impact on the environment, beyond those covered specifically in the key in subsection (2) of this section.

Substitute



For Aerial Chemicals

For DNR	For DNR Region Office Use Only								
FPA/N#:	2815986								
Region:	NW								
Received Date:	8-10-2017								

USE THE INSTRUCTIONS TO COMPLETE THIS APPLICATION. TYPE OR PRINT IN INK:

1.	Landowner,	Timber Owner, and	l Operator
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Legal Name of LANDOWNER	Legal Name of TIMBER OWNER	Legal Name of OPERATOR
Sierra Pacific Industries	Sierra Pacific Industries	Sierra Pacific Industries
Mailing Address:	Mailing Address:	Mailing Address:
14353 McFarland Road	14353 McFarland Road	14353 McFarland Road
City, State, Zip	City, State, Zip	City, State, Zip
Mt. Vernon, WA 98273	Mt. Vernon, WA 98273	Mt. Vernon, WA 98273
Phone (360) 424-7619	Phone (360) 424-7619	Phone (360) 424-7619
Email:	Email:	Email:

2.	Contact person.
	OOHWOLPCIOOH.

Contact Person:	Phone (360) 424-7619
Doug Sand	
	Email:

- 3. Are you substituting prescriptions from an approved state or federal conservation agreement or watershed analysis?
 - No. Yes. Write "Using prescriptions" in tables that apply. Attach or reference prescriptions/crosswalk on file.
- 4. Complete the following property description:

Unit Number	Acres	Section	Township	Range	East/West	County
1	40	27	28	8	East	Snohomish
2	25	22	28	8	East	Snohomish
					RECEI	VED NW REGION
					I	JG 1 0 2017

5. Chemical Information - Show all buffers on your Activity Map**

Fall	Release (Anticipated year)	2017	2017	2017	2017										
Spring	Release (Anticipated year)														
Site Prep															
	100 feet of surface water?	Yes	Yes	Yes	Yes										
Are you spraying within:	200 feet of a residence?	No	No	No	No										
Are yo	100 feet of agricultural land?	No	Š	No	No										
*List associated EPA	Ingredient	62719-527	2935-11001	81927-24	241-299										
*Active Ingredient		triclopyr	Modified Vegetable Oil Drift Control	lmazapyr	lmazapyr										
Acres	בפונים	65	65	65	65										
Unit Identifier (Must	V	1,2	1,2	1,2	1,2										

*Most active ingredients are sold under multiple brand names. Each brand has a different EPA number. One brand of each active ingredient is generally used at a time and brands may be substituted if listed above.

6.	ls	this prop	osal: (An	swer every question)
	a.	⊠ No.	Yes.	Within the city limits or an urban growth area? If Yes, include SEPA Environmental Checklist or SEPA Determination or approved 10-year management plan
	b.	X No.	Yes.	Within a public park? If Yes, include SEPA Environmental Checklist or SEPA Determination
	c.	⊠ No.	Yes.	Within 500 feet of a public park? Park name:
	d.	⊠ No.	Yes.	For an Alternate Plan? If yes, include a copy of the Alternate Plan
	e.	⊠ No.	Yes.	Using a chemical that is not registered or for a use that is not allowed under the label? If yes, include a copy of your Experimental Use Permit and a SEPA Environmental Checklist
	f.	⊠ No.	Yes.	Applying a pesticide in a Type A or Type B Wetland? If Yes, include a SEPA Environmental Checklist or SEPA Determination
7.		re you sp]No.	raying 24	10 or more contiguous acres? If Yes, include a SEPA Environmental Checklist.
8.	Na			nis forest practices activity area to determine whether it may involve historic sites and/or ural resources? Read the instructions before answering this question.
9.	Ad	ditional I	nformatio	on (Attach additional pages if necessary):

Page 3

10. We acknowledge the following:

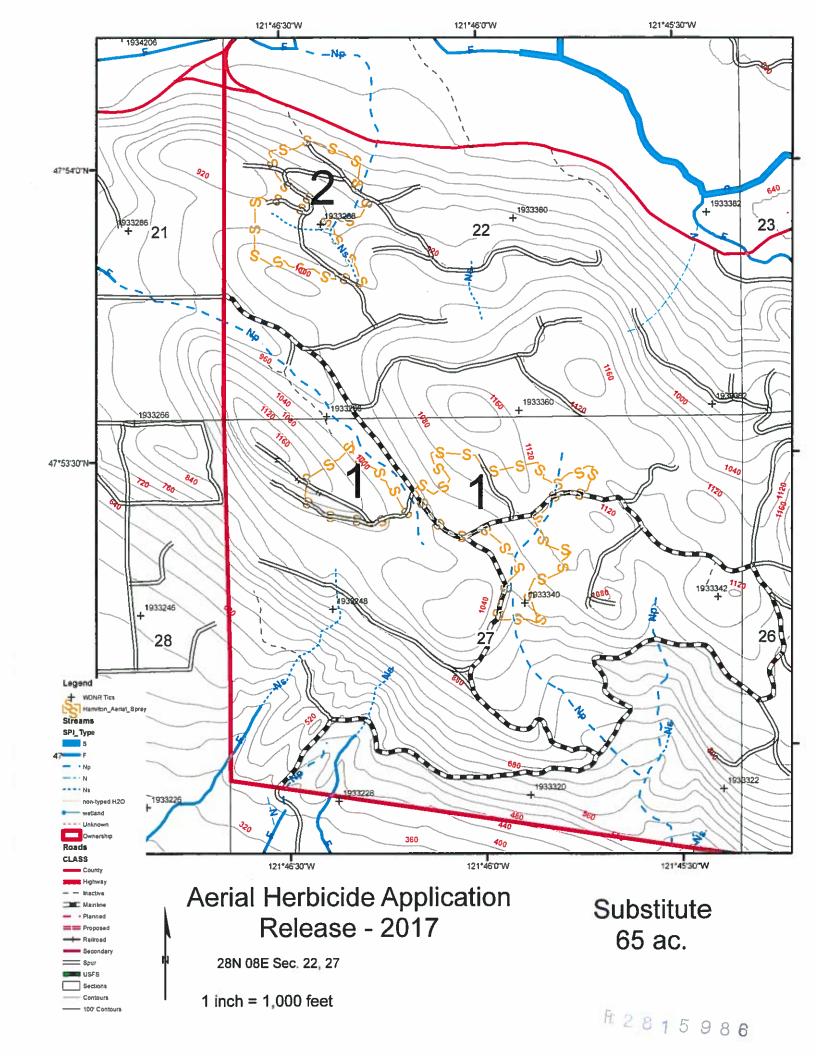
- The information on this application/notification is true.
- We understand this proposed forest practice is subject to:
 - The Forest Practices Act and Rules AND
 - All other federal, state or local regulations.
- Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.
- The following may result in an unauthorized incidental take of certain endangered or threatened fish species:
 - Inadvertent Discovery Chapters 27.44, 27.53, 68.50 and 68.60 RCW
 - If you find or suspect you have found an archaeological object or Native American cairn, grave, or glyptic record, immediately cease disturbance activity, protect the area and promptly contact the Department of Archaeology and Historic Preservation at 360 586-3077.
 - If you find or suspect you have found human skeletal remains, immediately cease disturbance activity, protect the area, and contact the County Coroner or Medical Examiner and local law enforcement as soon as possible. Failure to report human remains is a misdemeanor.

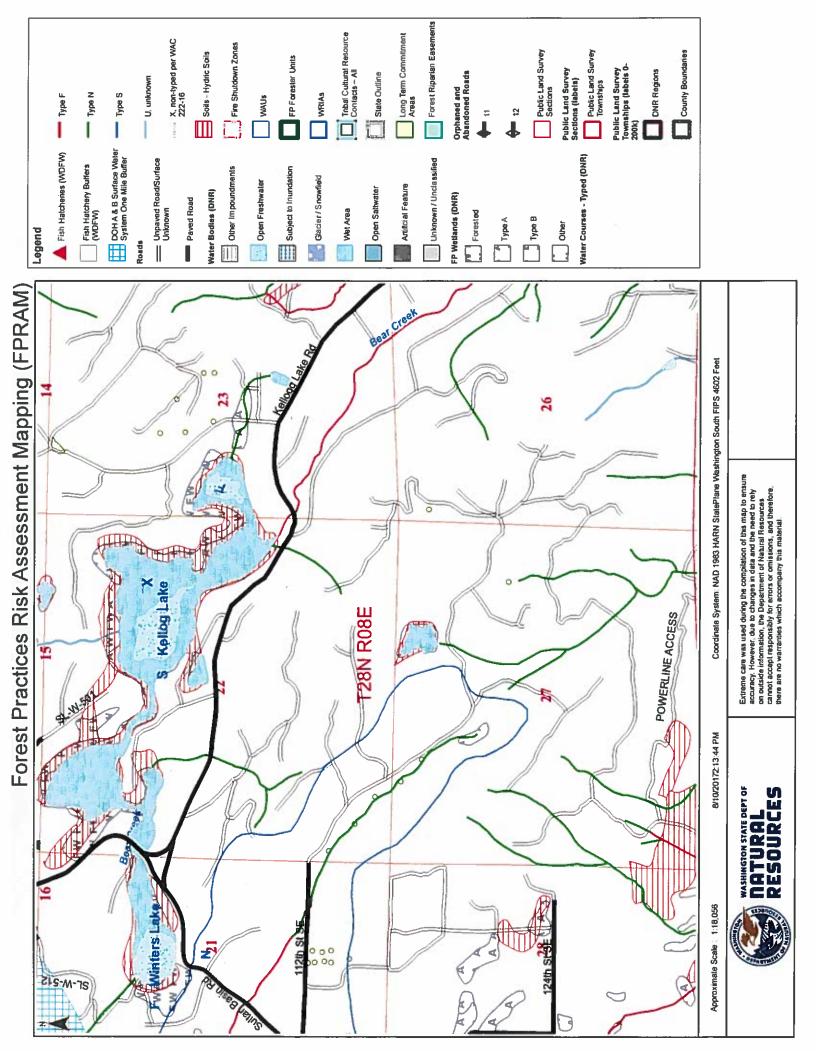
We understand that applying chemicals is not an activity included as part of the DNR's Incidental Take Permit for aquatic species. We affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules as well as all other federal, state or local regulations. Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.

The landowner understands that by signing and submitting this FPA, he/she is authorizing the Department of Natural Resources to enter the property in order to review the proposal, inspect harvest operations, and monitor compliance for up to three years after its expiration date. RCW 76.09.150

e of TIMBER OWNER	Signature of OPERATOR
nt than landowner)	(If different than landowner)
ne:	Print Name:
	Date:
	nt than landowner)

Aerial chemical revised 02-09-2017 Page 4







FPA/N No:	2815986			
Effective Date:	9/6/2017			
Expiration Date:	9/6/2020			
Shut Down Zone:				
EARR Tax Credit:	[] Eligible	[x] Non-eligible		
Reference:	Subs	stitute spray		

Forest Practices Application/Notification Notice of Decision		Expiration Date: Shut Down Zone: EARR Tax Credit: Reference:		9/6/2020			
				[] Eligible Subs	[x] Non-eligible titute spray		
Decision [] Notification [×] Approved [] Disapproved [] Closed	This	Forest Practices	begin before the e Application is sui Application is dis awn FPA/N.	bject to the con			<i>i</i> .
FPA/N Classi	fication			Number of	Years (Granted on M	ulti-Year Request
[] Class II [x] Class III	[] Class IVG	[] Class IVS	[] 4 years	[]5	/ears	
Notify the Depa Call (360) 856- legal description FOR YOUR INI Aerial chemical	artment of Nat 3500 for Fore n of your ope FORMATION application a eatment. Pos	st Practices and the ration, : sreas need to be posting shall remain a	least 48 business h ne Skykomish Fores	t Practice Foreste ner by signing at	er and po	rovide the applic	unit to be sprayed. ation number and alar access at least 5
			60-856-3500) 48 bus al description for yo		re comm	nencing timber l	narvest operations.
Landowner / op the County's No		o check with Snoh	omish County PDS	to make sure the	wetland	and surroundin	g area is not part of
Issued By:		Steven Hu	ang L. U.	Regi	on:	Nort	hwest
Title:	Skyko	mish Forest Practi	ce Forester	Date:		9/6/20	017
Copies to:	[X] Landow	ner, Timber Owne	er and Operator.				
Issued in	[]Landow	ner ()Timher Ow	mer [] Onerator F	Rv•			

Appeal Information

You have thirty (30) days to appeal this Decision and any related State Environmental Policy Act determinations to the Pollution Control Hearings Board in writing at the following addresses:

Physical address: 1111 Israel Rd. SW, Ste 301, Tumwater, WA 98501

Mailing address: P.O. BOX 40903, OLYMPIA, WA 98504-0903

Information regarding the Pollution Control Hearings Board can be found at: http://www.eluho.wa.gov/

At the same time you file an appeal with the Pollution Control Hearings Board, also send a copy of the appeal to the Department of Natural Resources' region office and the Office of the Attorney General at the following addresses:

Office of the Attorney General Natural Resources Division 1125 Washington Street SE PO Box 40100 Olympia, WA 98504-0100

And

Department Of Natural Resources Northwest Region 919 N Township St

Sedro-Woolley WA 98284

Other Applicable Laws

Operating as described in this application/notification does not ensure compliance with the Endangered Species Act, or other federal, state, or local laws.

Transfer of Forest Practices Application/Notification (WAC 222-20-010)

Use the "Notice of Transfer of Approved Forest Practices Application/Notification" form. This form is available at region offices and on the Forest Practices website: http://www.dnr.wa.gov/businesspermits/forestpractices. Notify DNR of new Operators within 48 hours.

Continuing Forest Land Obligations (RCW 76.09.060, RCW 76.09.070, RCW 76.09.390, and WAC 222-20-055)

Obligations include reforestation, road maintenance and abandonment plans, conversions of forest land to non-forestry use and/or harvest strategies on perennial non-fish habitat (Type Np) waters in Eastern Washington.

Before the sale or transfer of land or perpetual timber rights subject to continuing forest land obligations, the seller must notify the buyer of such an obligation on a form titled "Notice of Continuing Forest Land Obligation". The seller and buyer must both sign the "Notice of Continuing Forest Land Obligation" form and send it to the DNR Region Office for retention. This form is available at DNR region offices.

If the seller fails to notify the buyer about the continuing forest land obligation, the seller must pay the buyer's costs related to continuing forest land obligations, including all legal costs and reasonable attorneys' fees incurred by the buyer in enforcing the continuing forest land obligation against the seller.

Failure by the seller to send the required notice to the DNR at the time of sale will be prima facie evidence in an action by the buyer against the seller for costs related to the continuing forest land obligation prior to sale.

DNR affidavit of mailing:

On this day	9/7/2017	, I placed in the United States mail at	Sedro-Woolley	, WA,
	(date)		(post office location)	
postage paid,	a true and accura	ate copy of this document. Notice of Decis	ion FPA # <u>2815986</u>	
	L Utgard		re	
(Printed	I name)	(Signature)		

Revisions to FPA/N __2815986_

DATE	DOCUMENT	DESCRIPTION
10/9/2017	Transfer Form	Change of Operator
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	1-12	
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OCT 06 2017 NW REGION

Forest Practices Application/Notification NOTICE OF TRANSFER

I/we transfer my/our rights, privileges, and obligations under this approved Forest Practices Application or Notification. I/we affirm that the information contained below is true and agree to comply with the rules authorized by the Forest Practices Act and to be bound by all conditions on the approved application or notification.

FPA/N Number:	2815986	_ Section(s):	22,27	_ Township: 28	Range: 8	
Original Landowner (Signature):						
Original Landowner (Printed):		Davids I C	1		13/2017	
New (New Operator – Fill out this section only if you are changing or adding an operator					
Legal Name of New C		Scotlori <u>Gray</u> ii yot	Mailing Add			
Wilbur-Ellis Agribu	usiness Division		P.O. Box	750		
Phone: (360) 262-3	3197		Napavine	, WA 98565		
Email:	01		attn: Core	y Fransen		
New Operator Signa	ture:	77		Date:	1/8/17	
New Operator Signa	tule. Acros		*		1011	
New Lando	wner – Fill out this sec	tion only if you are	transferring	our FPA to a new lando	owner	
Legal Name of New L	andowner: (Print)		Mailing Add	ress:		
Phone:			1			
 Email:						
New Landowner Sig	nature:			Date:		
Item Landowner Org	nataro.					
New Ti	mber Owner – Fill out	this section only it	you are trans	ferring your timber right	s	
Legal Name of Timbe	r Owner: (Print)		Mailing Add	ress:		
Phone:			1			
Email:						
Forest Tax Reporting Account Number: (Contact Dept. of Revenue to get this number: 1-800-548-8829)						
New Timber Owner	Cimpturat	"		Date:		
New Timber Owner Signature:						
Received by:	h. Utgard	actices Staff Signal	ure)	Date: <u> </u>	7.17	